

<b>ORDER FOR SUPPLIES OR SERVICES</b>										PAGE 1 OF 5		
1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE07-00-D-M001</div>			2. DELIVERY ORDER/CALL NO. <div style="border: 1px solid black; padding: 2px;">0221</div>		3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2003MAY21</div>		4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>		5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DOA4</div>			
6. ISSUED BY TACOM AMSTA-AQ-ALEC BRIAN CORRIGAN (586)574-8227 WARREN, MICHIGAN 48397-5000 EMAIL: CORRIGANB@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL			CODE <div style="border: 1px solid black; padding: 2px;">W56HZV</div>		7. ADMINISTERED BY (If other than 6) DCMA BIRMINGHAM BURGER PHILLIPS CENTER 1910 THIRD AVE. NORTH, RM 201 BIRMINGHAM, AL 35203-2376			CODE <div style="border: 1px solid black; padding: 2px;">S0101A</div>		8. DELIVERY FOB  <input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)		
9. CONTRACTOR  <div style="border: 1px solid black; padding: 2px;">NAME CAMBER CORPORATION AND 635 DISCOVERY DR NW ADDRESS HUNTSVILLE, AL. 358062801</div>			CODE <div style="border: 1px solid black; padding: 2px;">OMWW4</div>		FACILITY <div style="border: 1px solid black; padding: 2px;">C</div>		NONE <div style="border: 1px solid black; padding: 2px;">HQ0338</div>		10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			
							11. X IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED		12. DISCOUNT TERMS			
							13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div>					
14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>			CODE <div style="border: 1px solid black; padding: 2px;"></div>		15. PAYMENT WILL BE MADE BY DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264				CODE <div style="border: 1px solid black; padding: 2px;">HQ0338</div>		MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2	
16. TYPE OF ORDER <div style="border: 1px solid black; padding: 2px;">DELIVERY/ CALL <input checked="" type="checkbox"/> X PURCHASE <input type="checkbox"/></div>												
THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT.												
Reference your <input type="checkbox"/> Oral <input type="checkbox"/> Written Quotation _____, Dated _____.												
furnish the following on terms specified herein.												
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.												
<div style="display: flex; justify-content: space-between;"> <div>NAME OF CONTRACTOR</div> <div>SIGNATURE</div> <div>TYPED NAME AND TITLE</div> <div>DATE SIGNED (YYYYMMDD)</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px;"> <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies: </div>												
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div>												
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT	22. UNIT PRICE		23. AMOUNT	
		SEE SCHEDULE CONTRACT TYPE: Cost-Plus-Fixed-Fee  KIND OF CONTRACT: System Acquisition Contracts										
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.						24. UNITED STATES OF AMERICA JUDITH K. BUSH /SIGNED/ BUSHAJ@TACOM.ARMY.MIL (586) 574-7041 BY: _____ CONTRACTING/ORDERING OFFICER				25. TOTAL \$235,152.54		
27a. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED												
b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE						c. DATE (YYYYMMDD)		d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE				
e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE						28. SHIP. NO. <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		29. D.O. VOUCHER NO.		30. INITIALS		
f. TELEPHONE NUMBER		g. E-MAIL ADDRESS				31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL		32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR		
36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.										34. CHECK NUMBER		
a. DATE (YYYYMMDD)		b. SIGNATURE AND TITLE OF CERTIFYING OFFICER								35. BILL OF LADING NO.		
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYYYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.		

<p style="text-align: center;"><b>CONTINUATION SHEET</b></p>	<p style="text-align: center;"><b>Reference No. of Document Being Continued</b></p> <p style="text-align: center;"><b>PIIN/SIIN</b> DAAE07-00-D-M001/0221      <b>MOD/AMD</b></p>	<p style="text-align: center;"><b>Page 2 of 5</b></p>
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**Name of Offeror or Contractor:**

SUPPLEMENTAL INFORMATION

PROGRAM:	OMNIBUS PROGRAM & ENGINEERING SUPPORT SERVICES
CONTRACT:	DAAE07-00-D-M001/0201 OPT YR 4
PURPOSE OF ORDER:	PM CS, 2202 Hours
TOTAL AMOUNT:	\$235,152.54

1. This action is Task Order number 0201 issued pursuant to Contract DAAE07-00-D-M001.
2. The purpose of this order is to provide for 2202 hours pursuant to Special Provisions H.1.3. This order will provide software support to PM Combat Systems.
3. This is a unilateral order for 2202 man-hours of level of effort, awarded on Cost Plus Fixed Fee basis in the amount of \$235,152.54. This includes \$224,935.26 cost and \$10,217.28 fixed fee.
4. The Contractor shall perform this order 0201 in accordance with the Scope of Work in Section C and Work Directive CAM-0201.
5. The period of performance is from 27 Jun 03 thru 26 Jun 04
6. PAYMENT

The contractor shall submit monthly invoices for payment for work performed in the previous month.

7. INVOICE INSTRUCTIONS

In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract. On each billing document prepared by the contractor, the CLIN/SUBCLIN applicable to that billing shall be specified. Where there is one ACRN applicable to the particular CLIN/SUB/CLIN being billed, the ACRN shall be specified as well.

8. PAYMENT INSTRUCTIONS FOR DFAS

- a. In accordance with the Prompt Payment clause (FAR 52.232-25), the following additional invoice instructions apply to this contract.
- b. The paying office shall pay each invoice only with the funds obligated under the CLIN/SUBCLIN specified on the voucher. Payments shall be made first from the oldest funds by fiscal year applicable to each individual CLIN. The oldest funds shall be disbursed in their entirety before proceeding to disburse the next ACRN.



<b>CONTINUATION SHEET</b>	<b>Reference No. of Document Being Continued</b> <b>PIIN/SIIN</b> DAAE07-00-D-M001/0221 <b>MOD/AMD</b>	<b>Page</b> 4 <b>of</b> 5
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**Name of Offeror or Contractor:**

DELIVERIES OR PERFORMANCE

F.1 Period of Performance

Period of performance for the work set forth in WD CAM-0201 is 27 Jun 03 thru 26 Jun 04.

\*\*\* END OF NARRATIVE F 001 \*\*\*

Name of Offeror or Contractor:

CONTRACT ADMINISTRATION DATA

										JOB			
LINE	PRON/		OBLG							ORDER	ACCOUNTING		OBLIGATED
<u>ITEM</u>	<u>AMS CD</u>	<u>ACRN</u>	<u>STAT</u>	<u>ACCOUNTING CLASSIFICATION</u>						<u>NUMBER</u>	<u>STATION</u>	<u>AMOUNT</u>	
0001AA	473MAU2647	AA	2	21	32033000035R5R02P31206525FB	S20113				3GAAU1	W56HZV	\$	235,152.54
31206500022													

SERVICE	ACCOUNTING	OBLIGATED
<u>NAME</u>	<u>STATION</u>	<u>AMOUNT</u>
Army	W56HZV	\$ 235,152.54
	TOTAL	\$ 235,152.54